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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> |  | Attorney Docket No. <b>GOT-0018</b>                               |  |
|   |  | First Inventor <b>Sei-no-suke Mizuno</b>                          |  |
|   |  | Title <b>SPARKLING LAMINATE FILM AND SPARKLING SHAPED ARTICLE</b> |  |
|   |  | Express Mail Label No.  |  |

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| <b>APPLICATION ELEMENTS</b><br><small>See MPEP chapter 600 concerning utility patent application contents.</small> | <b>ADDRESS TO:</b> MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
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| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/><small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status.<br/><small>See 37 CFR 1.27.</small></p> <p>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>10</b>]</span><br/><small>(preferred arrangement set forth below)</small><ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul></p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>3</b>]</span></p> <p>5. Oath or Declaration <span style="float: right;">[Total Sheets <b>2</b>]</span><ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/><small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/><small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul></li></ul></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul></p> <p style="text-align: center;"><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of Attorney</span><br/><small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <span style="float: right;"><input checked="" type="checkbox"/> Copies of IDS Citations</span></p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/><small>(Should be specifically itemized)</small></p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)<br/><small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br/><small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input type="checkbox"/> Other: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span></p> |
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

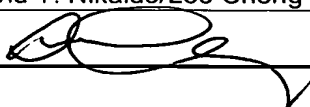
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|  |  |           |                |          |                |
|--|--|-----------|----------------|----------|----------------|
| <b>19. CORRESPONDENCE ADDRESS</b>  |  |           |                |          |                |
| <input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; display: inline-block; width: 150px; text-align: center;">23353</span> OR <input type="checkbox"/> Correspondence address below |  |           |                |          |                |
| Name   | RADER, FISHMAN & GRAUER PLLC<br>David T. Nikaido |           |                |          |                |
| Address  | 1233 20th Street, N.W.<br>Suite 501              |           |                |          |                |
| City   | Washington                                       | State     | DC             | Zip Code | 20036          |
| Country  | US   | Telephone | (202) 955-3750 | Fax      | (202) 955-3751 |

|                    |   |                                    |                  |
|--------------------|---|------------------------------------|------------------|
| Names (Print/Type) | David T. Nikaido/Lee Cheng  | Registration Nos. (Attorney/Agent) | 22,663/40,949    |
| Signature          |  | Date                               | October 16, 2003 |

17548: U.S. PTO

10/685587



10/16/03



15915 U.S. PTO

101603

Use in lieu of PTO/SB/17 (08-03)  
(Form updated to reflect FY 2004 fees effective 10/1/03)

| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 0;">Effective 10/01/2003, Patent fees are subject to annual revision.</p>  |                            | <b>Complete if Known</b>   |                            |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
|--|----------------------------|--|----------------------------|--|---------------|-----------------|----------|-----------------|------------------|--|----------|-----------|----------------|------|-----|--------------------|--------|-------------------------------------|-----|------|-----|-------------------|----|---|-----|------|-----|------------------|-----|---------------------------|-----|------|-------|--------------------|-------|--|-----|------|------|------------------------|------|--|--|------|--------|------|--------------|---|--|--------------|-----|--------------|----|--|----------|----------|----------|----------|----------|---|----|------|-----|------------------------|-----|--|----|------|-------|-----------------------------------|-----|---|-----|------|-------|---------------------------------------|-------|--|----|------|-----|--|-----|------------------|----|------|-----|--|-----|--|--|------|-----|------|------------|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|-------|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|---------------------|-------------|
| <div style="border: 1px solid black; padding: 5px;"><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div>  |                            | Application Number   | NEW APPLICATION            |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
|  |                            | Filing Date  | October 16, 2003           |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
|  |                            | First Named Inventor   | Sei-no-suke Mizuno         |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
|  |                            | Examiner Name  | Not Yet Assigned           |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
|  |                            | Art Unit   | N/A                        |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 425.00  |                            | Attorney Docket No.  | GOT-0018                   |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>METHOD OF PAYMENT</b> (check all that apply)<br><div style="display: flex; justify-content: space-between; font-size: x-small;"><div><input type="checkbox"/> Check   <input type="checkbox"/> Credit Card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other   <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account:<br/>Deposit Account Number: 18-0013<br/>Deposit Account Name: Rader, Fishman &amp; Grauer PLLC</div></div> <p>The Director is authorized to: (check all that apply)</p> <div style="display: flex; justify-content: space-between; font-size: x-small;"><div><input checked="" type="checkbox"/> Charge fee(s) indicated below   <input checked="" type="checkbox"/> Credit any overpayments</div><div><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div></div> <div style="font-size: x-small;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div> |                            | <b>FEE CALCULATION</b> (continued)<br><br><b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr><tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr><tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr><tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr><tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr><tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr><tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr><tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr><tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr><tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="6">Other fee (specify) _____</td></tr><tr><td colspan="4">*Reduced by Basic Filing Fee Paid</td><td><b>SUBTOTAL (3)</b></td><td>(\$ ) 40.00</td></tr></tbody></table> |                            | Large Entity   |               | Small Entity    |          | Fee Description | Fee Paid         | Fee Code   | Fee (\$) | Fee Code  | Fee (\$)       | 1051 | 130 | 2051               | 65     | Surcharge - late filing fee or oath |     | 1052 | 50  | 2052              | 25 | Surcharge - late provisional filing fee or cover sheet. |     | 1053 | 130 | 1053             | 130 | Non-English specification |     | 1812 | 2,520 | 1812               | 2,520 | For filing a request for <i>ex parte</i> reexamination |     | 1804 | 920* | 1804                   | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805 | 1,840*       | Requesting publication of SIR after Examiner action   |  | 1251         | 110 | 2251         | 55 | Extension for reply within first month |          | 1252     | 420      | 2252     | 210      | Extension for reply within second month |    | 1253 | 950 | 2253                   | 475 | Extension for reply within third month |    | 1254 | 1,480 | 2254                              | 740 | Extension for reply within fourth month |     | 1255 | 2,010 | 2255                                  | 1,005 | Extension for reply within fifth month |    | 1401 | 330 | 2401   | 165 | Notice of Appeal |    | 1402 | 330 | 2402   | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145        | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | <b>SUBTOTAL (3)</b> | (\$ ) 40.00 |
| Large Entity   |                            | Small Entity   |                            | Fee Description  | Fee Paid      |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Fee Code   | Fee (\$)                   | Fee Code   | Fee (\$)                   |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1051   | 130                        | 2051   | 65                         | Surcharge - late filing fee or oath  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1052   | 50                         | 2052   | 25                         | Surcharge - late provisional filing fee or cover sheet.                    |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1053   | 130                        | 1053   | 130                        | Non-English specification  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1812   | 2,520                      | 1812   | 2,520                      | For filing a request for <i>ex parte</i> reexamination                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1804   | 920*                       | 1804   | 920*                       | Requesting publication of SIR prior to Examiner action                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1805   | 1,840*                     | 1805   | 1,840*                     | Requesting publication of SIR after Examiner action                        |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1251   | 110                        | 2251   | 55                         | Extension for reply within first month                                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1252   | 420                        | 2252   | 210                        | Extension for reply within second month                                    |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1253   | 950                        | 2253   | 475                        | Extension for reply within third month                                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1254   | 1,480                      | 2254   | 740                        | Extension for reply within fourth month                                    |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1255   | 2,010                      | 2255   | 1,005                      | Extension for reply within fifth month                                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1401   | 330                        | 2401   | 165                        | Notice of Appeal   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1402   | 330                        | 2402   | 165                        | Filing a brief in support of an appeal                                     |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1403   | 290                        | 2403   | 145                        | Request for oral hearing   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1451   | 1,510                      | 1451   | 1,510                      | Petition to institute a public use proceeding                              |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1452   | 110                        | 2452   | 55                         | Petition to revive - unavoidable   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1453   | 1,330                      | 2453   | 665                        | Petition to revive - unintentional   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1501   | 1,330                      | 2501   | 665                        | Utility issue fee (or reissue)   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1502   | 480                        | 2502   | 240                        | Design issue fee   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1503   | 640                        | 2503   | 320                        | Plant issue fee  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1460   | 130                        | 1460   | 130                        | Petitions to the Commissioner  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1807   | 50                         | 1807   | 50                         | Processing fee under 37 CFR 1.17(q)  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1806   | 180                        | 1806   | 180                        | Submission of Information Disclosure Stmt                                  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 8021   | 40                         | 8021   | 40                         | Recording each patent assignment per property (times number of properties) | 40.00         |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1809   | 770                        | 2809   | 385                        | Filing a submission after final rejection (37 CFR 1.129(a))                |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1810   | 770                        | 2810   | 385                        | For each additional invention to be examined (37CFR 1.129(b))              |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1801   | 770                        | 2801   | 385                        | Request for Continued Examination (RCE)                                    |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1802   | 900                        | 1802   | 900                        | Request for expedited examination of a design application                  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Other fee (specify) _____  |                            |  |                            |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| *Reduced by Basic Filing Fee Paid  |                            |  |                            | <b>SUBTOTAL (3)</b>  | (\$ ) 40.00   |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>1. BASIC FILING FEE</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>385.00</td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td>(\$ ) 385.00</td></tr></tbody></table>  |                            | Large Entity   |                            | Small Entity   |               | Fee Description | Fee Paid | Fee Code        | Fee (\$)         | Fee Code   | Fee (\$) | 1001      | 770            | 2001 | 385 | Utility filing fee | 385.00 | 1002                                | 340 | 2002 | 170 | Design filing fee |    | 1003  | 530 | 2003 | 265 | Plant filing fee |     | 1004                      | 770 | 2004 | 385   | Reissue filing fee |       | 1005   | 160 | 2005 | 80   | Provisional filing fee |      | <b>SUBTOTAL (1)</b>                                    |  |      |        |      | (\$ ) 385.00 | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td>(\$ ) 0.00</td></tr></tbody></table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p> |  | Large Entity |     | Small Entity |    | Fee Description                        | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202                                    | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                   | 86 | 2201 | 43    | Independent claims in excess of 3 |     | 1203                                    | 290 | 2203 | 145   | Multiple dependent claim, if not paid |       | 1204                                   | 86 | 2204 | 43  | ** Reissue independent claims over original patent |     | 1205             | 18 | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b>                    |  |      |     |      | (\$ ) 0.00 |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Large Entity   |                            | Small Entity   |                            | Fee Description  | Fee Paid      |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Fee Code   | Fee (\$)                   | Fee Code   | Fee (\$)                   |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1001   | 770                        | 2001   | 385                        | Utility filing fee   | 385.00        |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1002   | 340                        | 2002   | 170                        | Design filing fee  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1003   | 530                        | 2003   | 265                        | Plant filing fee   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1004   | 770                        | 2004   | 385                        | Reissue filing fee   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1005   | 160                        | 2005   | 80                         | Provisional filing fee   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>SUBTOTAL (1)</b>  |                            |  |                            |  | (\$ ) 385.00  |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Large Entity   |                            | Small Entity   |                            | Fee Description  | Fee Paid      |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Fee Code   | Fee (\$)                   | Fee Code   | Fee (\$)                   |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1202   | 18                         | 2202   | 9                          | Claims in excess of 20   |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1201   | 86                         | 2201   | 43                         | Independent claims in excess of 3  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1203   | 290                        | 2203   | 145                        | Multiple dependent claim, if not paid                                      |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1204   | 86                         | 2204   | 43                         | ** Reissue independent claims over original patent                         |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| 1205   | 18                         | 2205   | 9                          | ** Reissue claims in excess of 20 and over original patent                 |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>SUBTOTAL (2)</b>  |                            |  |                            |  | (\$ ) 0.00    |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| <b>SUBMITTED BY</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><tr><td style="width: 30%;">Names (Print/Type)</td><td style="width: 30%;">David T. Nikaido/Lee Cheng</td><td style="width: 20%;">Registration Nos. (Attorney/Agent)</td><td style="width: 20%;">22,663/40,949</td></tr><tr><td>Signature</td><td></td><td>Date</td><td>October 16, 2003</td></tr></table>   |                            | Names (Print/Type)   | David T. Nikaido/Lee Cheng | Registration Nos. (Attorney/Agent)   | 22,663/40,949 | Signature       |          | Date            | October 16, 2003 | <b>(Complete (if applicable))</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><tr><td>Telephone</td><td>(202) 955-3750</td></tr></table> |          | Telephone | (202) 955-3750 |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Names (Print/Type)   | David T. Nikaido/Lee Cheng | Registration Nos. (Attorney/Agent)   | 22,663/40,949              |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Signature  |                            | Date   | October 16, 2003           |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |
| Telephone  | (202) 955-3750             |  |                            |  |               |                 |          |                 |                  |  |          |           |                |      |     |                    |        |                                     |     |      |     |                   |    |   |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |      |        |      |              |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |            |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                     |             |